United Nations E/ICEF/2014/P/L.15

Economic and Social Council

Distr.: Limited
19 August 2014

Original: English
French
Spanish

For action

United Nations Children's Fund
Executive Board
Second regular session 2014
9-12 September 2014
Item 5 (b) of the provisional agenda*

Country programme document**

Paraguay

Summary

The country programme document (CPD) for Paraguay is presented to the Executive Board for discussion and approval. The Executive Board is requested to approve the aggregate indicative budget of $4,910,000 from regular resources, subject to the availability of funds, and $7,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2015 to 2019.

* E/ICEF/2014/14.

** In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on a draft version that was shared with them 12 weeks before the 2014 second regular session of the Executive Board.

14-59466 (E) 190814

Please recycle

Programme rationale

1. Paraguay has 6.6 million inhabitants, of whom 2.4 million (36 per cent) are children and adolescents. The indigenous population accounts for 2 per cent of the population, of which 54 per cent is children and adolescents.

2. Total and extreme poverty have decreased to 24 per cent and 10 per cent respectively as of 2013, but poverty affects children and adolescents more intensely – 33 per cent are poor and 15 per cent live in extreme poverty. Social inequalities are aggravated and poverty is greater among rural children (43 per cent and 23 per cent respectively) and indigenous children (77 per cent and 63 per cent respectively in 2008)[1]. The social protection programmes for cash transfers do not include comprehensive care measures for children and adolescents. Cash transfers are conditioned on school attendance and health check-ups, though these are scarcely monitored.

3. The Committee on the Rights of the Child, in reviewing the country's submission, recommended increasing investment in children, improving information systems, increasing children's access to health and nutrition services, and improving access to and quality of education, especially in rural and indigenous areas. It particularly emphasized early education, professional training of teachers, raising parental awareness of early stimulation and developing policies and programmes to prevent and respond to violence, abuse and exploitation of children.[2]

4. Children and adolescents are not sufficiently reflected in public policies and investment, despite the progress in legislative areas – against child pornography, trafficking and bullying; in support for care for child victims of violence; and in modifications to the Penal Code regarding sexual abuse and the law for nutritional guarantees in early childhood. The percentage of gross domestic product (GDP) destined for social investment (11 per cent in 2010) is among the lowest in Latin America, and investment in children fell from 6 per cent of GDP in 2000 to 5.3 per cent in 2012.[3] Social protection programmes do not include comprehensive interventions for children and adolescents.

5. The country has made significant efforts to improve data collection. However, statistical systems do not generate enough disaggregated data, and there is a lack of evidence on issues concerning children, especially on violence, abuse and exploitation. Specialized surveys are not regularly implemented, which poses challenges for follow-up and analysis, especially for children and adolescents belonging to excluded populations. Information is based largely on administrative data, which tend to be limited due to under-registration.

6. Paraguay has reported significant achievements with respect to the Millennium Development Goals, yet great challenges remain. Maternal mortality declined in recent years, but the rate continues to be very high (84.9 per 100,000 live births) given that 95

[1] Dirección General de Estadísticas, Encuestas y Censos (DGEEC) (General Directorate of Statistics, Surveys and Censuses), Encuesta Permanente de Hogares 2013 (Permanent Household Survey) and Encuesta de Hogares Indígenas (Indigenous Household Survey), 2008.

[2] Committee on the Rights of the Child, recommendations for Paraguay, 2010.

[3] UNICEF Paraguay, 'Inversión en la Infancia', 2013.

per cent of births take place in health care facilities.[4] The main direct causes of maternal mortality are haemorrhage, toxaemia and abortions. In 2008, 20 per cent of all births were to adolescent mothers aged 15-19.[5] The reasons for high maternal mortality are related to insufficient budgets, late prenatal checks, delay in access to obstetric services and poor quality of care in those services. Violence against pregnant women and lack of support by their partners contribute to the mortality rate.

7. Neonatal mortality is particularly high and has remained unchanged, at 11 per 1,000 live births, over the last 20 years, with significant disparities among geographic zones. Of every 100 children under 19 who die in Paraguay, 42 die in the first 28 days of life due to delivery complications, infections and congenital malformations. Two thirds of these deaths are preventable.[6] The Ministry of Public Health and Social Welfare, UNICEF and the Pan American Health Organization (PAHO) have recently begun the design of a national mobilization campaign against maternal and neonatal mortality.

8. According to the National Institute of Food and Nutrition, chronic malnutrition affects 14.5 per cent of the children under 5 who come to clinics for health care (2012). Poverty, food scarcity, lack of safe drinking water and basic sanitation, low birthweight, low rates of breastfeeding (47 per cent of newborns begin in the first hour of life, but only 12.8 per cent are exclusively breastfed through the age of 6 months) and unawareness of correct complementary feeding practices are the main causes of chronic malnutrition. The recent Early Childhood Nutritional Guarantee Law is an important step, as it extends coverage of preventive actions and care for malnourished children. Nonetheless, implementation of the National Child Food and Nutrition Plan (PANI) in the framework of the law remains limited, the budget is insufficient and the monitoring and evaluation system needs improvement to aid decision-making.

9. Paraguay has advanced in education coverage, but inequities and low quality persist. Coverage in preschool, the third cycle of basic education and secondary education remains low. The average number of years of study increased from 6.67 to 8.64 between 1997 and 2011, but significant disparities remain between urban and rural zones (10 and 6.4 years of schooling respectively) and between the wealthiest urban quintile and the poorest rural one (12 and 5.3 years respectively). Indigenous peoples have on average 3 years of education.[7] Parity between boys and girls attending school is maintained at all levels, but there is no qualitative information on violence and gender equality in the system.

10. In Paraguay, 8.4 per cent of all children between ages 5 and 17 are out of school, with adolescents between 15 and 18 the most excluded.[8] Insufficient attention to early childhood, late entry into school and poor quality of schooling are reflected in the high degree of repetition in the first cycle of basic education, low retention rates and rates of children old for their grade. Of every 100 children beginning first grade, only 35 finish secondary school in the officially stipulated time. The World Economic Forum 2013-2014 ranks Paraguay 138th in education system quality out of 148 countries.

---

[4] Ministerio de Salud Pública y Bienestar Social, sub-sistema de información de las estadísticas vitales.

[5] UNICEF Paraguay, 'Situación del derecho a la salud de la niñez y la adolescencia en Paraguay', 2013.

[6] Ibid.

[7] DGEEC, Permanent Household Survey 2011 and Indigenous Household Survey 2008.

[8] DGEEC, Permanent Household Survey 2013.

11. Children and adolescents who are more likely to be excluded from school are those who live in rural areas or in poverty, are indigenous and/or monolingual Guaranis, have a disability or do not attend preschool. Exclusion affects girls and adolescent boys to a greater degree. One of the main causes of school dropout among adolescents is the lack of pertinence of the curriculum, which does not meet their expectations in terms of training for the job market. The exiting vocational/technical training opportunities are disperse and provided by diverse institutions. They are not linked to the official education system and are not yet evaluated for their efficiency and effectiveness.

12. The National System for the Promotion and Protection of Children's Rights, created by law, has been poorly implemented in terms of establishing the necessary structures and the quality of its services. A quarter of children under age 1 do not have birth certificates, and the rate rises to 35 per cent among indigenous children.[9] The main barriers are a shortage of civil registry offices, insufficient institutional collaboration and legal gaps. On a positive note, registration offices have recently begun opening in maternity hospitals.

13. Around 61 per cent of all children suffer from physical and psychological violence, and 35 per cent suffer serious abuse.[10] The number of complaints filed regarding sexual abuse of children and adolescents is increasing.[11] Almost 25 per cent of children between ages 5 and 17 perform some kind of remunerated economic activity.[12] The child labor rate is above 30 per cent among males in rural areas and adolescents.[13] In Paraguay around 46,993 girls and adolescents perform domestic labor, and a large percentage of them do not attend school. In 2012, 1,707 children under age 18 were living in 68 alternative care institutions, 5 per cent of them under age 3.[14] The number of adolescents (aged 14 to 18) deprived of their liberty was approximately 500, in 10 institutions.[15]

14. Paraguay frequently is affected by floods and droughts that jeopardize agriculture and livestock raising. These natural disasters also threaten the survival and development of children and adolescents, especially in indigenous and rural communities.

15. Important lessons regarding indigenous education from the 2007-2014 programme are serving as a foundation for the new country programme. The midterm review document noted that efforts to construct an inclusive education policy for indigenous children benefited from sustained UNICEF support. This particularly focused on strengthening indigenous peoples' capacities to affect educational policies and fostering their participation in dialogues with civil society organizations, academia and education authorities. This process led to the approval of the Law on Indigenous Education (2007) and the Languages Law (2010), as well as the installation and strengthening of

[9] DGEEC, Permanent Household Survey 2011 and Indigenous Household Survey 2008.

[10] Base Educativa y Comunitaria de Apoyo (Educational and Community Support Basis) -BECA/ UNICEF, 'Estudio sobre maltrato infantil en el ámbito familiar Paraguay' ('Study on child abuse in the family in Paraguay'), 2010.

[11] Number of cases received by the Public Ministry for punishable acts of maltreatment of children and adolescents and sexual abuse of children and adolescents, 2005-2010.

[12] ILO International Programme on the Elimination of Child Labour and DGEEC, 'National Survey of Activities of Children and Adolescents, 2011: Magnitude and characteristics of child and adolescent labour in Paraguay' 2013.

[13] Ibid.

[14] UNICEF, calculated based on the tracking and monitoring system of the National Secretariat for Children and Adolescents (SNNA).

[15] These statistics are taken from reports found on the website of the Ministry of Justice and Labour, www.mjt.gov.py.

the General Directorate of Indigenous Education (DGEEI). The study of 'Schools in Indigenous Communities in Paraguay 2006-2011', published by the Ministry of Education and UNICEF in 2013, revealed that the creation of the DGEEI led to an increase in indigenous enrolment at all levels, especially of girls, and in secondary education. Other results were reduced grade repetition and dropout and an improvement in the number and academic level of teachers from indigenous groups. UNICEF also provided support to the indigenous peoples of Paraguay to prepare the 2013-2018 Plurilingual Education Plan, which was ratified by the current Government.

16. Advocacy based on updated data on the situation of children facilitated the discussion and positioning of child-related themes during the recent electoral period. It also contributed to coordinated mobilization with various non-governmental organizations (NGOs) comprising the Children's Front and partnerships with the private sector, 'thinking groups' (dedicated to generating knowledge through research) and the media. Implementation of a well-articulated communication campaign with key messages contributed to these mobilization efforts, as evidenced in extensive media coverage and more citizen recognition of the importance of children's themes on the electoral agenda. As a result, all the presidential candidates signed the '20 Commitments for Children and Adolescents', and it was subsequently ratified by the president. These commitments are being incorporated into the National Development Plan (NDP) and are part of the United Nations Development Assistance Framework (UNDAF) and the new country programme.

Programme priorities and partnerships

17. The programme's overall objective is to support the country in ensuring that children and adolescents, especially those who are excluded and disadvantaged, have their rights realized as a result of the progressive elimination of the barriers impeding access to quality social services and a protection system that is effective against all kinds of violence.

Programme components

18. The programme of cooperation is aligned with the recommendations of the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women, as well as with the strategies and results outlined in the NDP and UNDAF. It will have four programmatic components and seven results at the outcome level. It is a part of the UNDAF in the areas of protection and guarantee of the rights of all persons, social inclusion, early childhood care, education and health and nutrition.

Health and nutrition

19. In the framework of strategic objective 2 of the NDP (section 2.3, health and nutrition) and UNDAF result 2.4, UNICEF will contribute to helping children, adolescents and women (especially from the most excluded groups) gain access to high-impact health services with a gender-sensitive and intercultural approach. The emphasis will be on reducing maternal and neonatal mortality.

20. Support will be provided to the Ministry of Public Health and Social Wellbeing in designing and implementing an innovative, evidence-based national mobilization promoting dialogue in the application of policies and programmes and fostering the increase of public health budgets for the reduction of maternal-neonatal mortality in the framework of the A Promise Renewed. This work will be performed in collaboration

with partners such as PAHO, the United Nations Population Fund (UNFPA) and the Inter-American Development Bank (IDB).

21. Together with these partners, the programme will support efforts to strengthen government technical capacity to analyse, develop guidelines and implement practical solutions to improve the health of pregnant women and newborn babies; promote the prevention of adolescent pregnancy; and implement the first phase of these services in the health districts of Alto Paraná and Canindeyú, where indigenous populations are concentrated. UNICEF will collaborate with the PAHO-supported Integrated Health Services Delivery Networks to strengthen their capacities to apply quality norms and standards, with an intercultural and gender-sensitive approach. The focus will be on maternal and neonatal care and prevention of adolescent pregnancy.

22. The country programme will implement communication strategies on the right to free universal mother and child care and will promote safe delivery that is culturally sensitive. It will prioritize education interventions to encourage women and their partners and families to care appropriately for mothers and newborns. The emphasis will be on paternal co-responsibility and prevention of violence against women, especially during pregnancy.

23. Analysis regarding the right to nutrition has revealed the scarcity of data, the most recent being from 2005. There are no national statistics on obesity. The data show alarming figures on malnutrition among indigenous and rural poor populations, and the barriers to nutrition are multisectoral. It is important to strengthen alliances with partners working to expand coverage of safe drinking water and sanitation and improve housing (with IDB and the National Secretariat for Housing and Habitat); food security (with the Ministry of Agriculture and Livestock and the Food and Agriculture Organization of the United Nations [FAO]); and school lunch programmes (with FAO). UNICEF will continue to focus on creating partnerships, based on its background promoting nutrition as a priority on the development agenda and in emergencies. This included support for passage of the Law on the Nutritional Guarantee for Early Childhood and the presidential commitment to increase the budget for its implementation.

24. In the framework of objective strategy 2 of the NDP (section 2.3, health and nutrition) and UNDAF result 2.5, the programme will contribute to provision of quality and timely care to prevent malnutrition and obesity in pregnant women and children under 5 by 2019. This support will take place through the Integrated Health Services Delivery Network, in collabaoration with PAHO, the United Nations Development Programme, World Food Programme and FAO.

25. UNICEF will advocate for allocation of the budget pledged to implement the nutrition law and for the country to develop the capacity to implement interventions with a gender-sensitive approach. The goal is to improve the nutrition of pregnant women, children and adolescents, especially from the most excluded and disadvantaged populations. At the local level, UNICEF will support strengthening of institutional capacities to identify and remove barriers impeding surveillance of growth and development; promotion of exclusive breastfeeding up to the age of 6 months; and family counselling for adequate complementary feeding beginning at 6 months.

26. The programme will promote implementation of national surveys to provide periodic nutritional data disaggregated by sex and population quintiles, with emphasis on indigenous populations. As an innovation, it will support strengthening of the PANI monitoring system to provide data in real time. It will also aid efforts to enhance institutional capacity for monitoring and analysing the effectiveness of the programme

for preventing and reducing malnutrition and obesity in children and pregnant women in selected districts.

Education

27. In the framework of strategic objective 2 of the NDP (section 2.2, education quality), UNDAF result 2.3 and the second, fifth and sixth general goals of the Education Goals 2021, the programme of cooperation will contribute to ensuring that by 2019 the most disadvantaged and excluded children will have access to an inclusive and quality education that encourages them to remain in the system and finish their studies. It will support the Ministry of Education to reinforce school disaster risk reduction strategies.

28. The programme will support the development and implementation of management mechanisms for inclusive quality education with a gender-sensitive and intercultural approach, aimed at the mentioned populations. It will collaborate with the Ministry of Education at national and subnational levels in partnership with the European Union, Organization of American States and NGOs.

29. To achieve gender equality in education and inclusion of children and adolescents from indigenous and rural groups and those with disability, UNICEF will promote policy dialogue and advocacy at national and local levels. Technical assistance will be provided to strengthen institutional capacities for quantitative and qualitative analysis of exclusion from education; analysis of the barriers that cause it; and implementation of innovative and intersectoral responses with a gender-sensitive and intercultural approach.

30. Because of the high dropout rate among children above age 12, UNICEF will advocate for improving the secondary school curriculum. It will also advocate for vocational/technical training that is linked to traditional education and can also lead to university. The effectiveness of these initiatives on returning of girls and adolescent boys to schools will be analysed. The programme will support indigenous children, adolescents and women to participate and learn leadership skills for influencing educational policies. Through teacher training, it will also contribute to avoiding gender stereotypes in the classroom.

31. The programme will support implementation of the recently approved National Plan for Early Childhood, advocating for greater investment. The priority is to strengthen technical capacity for standardized normative frameworks and competencies to improve family child-rearing practices. The programme will also support comprehensive care services to encourage inclusive and relevant early childhood education in the areas of greatest exclusion.

Protection

32. In the framework of strategic objective 2 of the NDP (section 2.7, protection of the rights of children) and UNDAF result 1.1, the programme will aim to ensure that by 2019 children and adolescents have access to timely birth registration and services to prevent violence, abuse and exploitation, including gender violence, and care for those who have experienced such abuses. In this component, UNICEF will collaborate with public institutions and NGOs participating in national round tables encouraging civil registration and discouraging violence. The country programme will coordinate with relevant partners to prevent, and provide support to children affected by, violence and abuse in emergency situations.

33. UNICEF will support strengthening of the National System for the Promotion and Protection of Children with advocacy and technical assistance, in order to improve its financing and the quality of its services. To increase the coverage of timely birth registration, UNICEF and its partners (Plan International and the Organization of American States) will advocate for a comprehensive law on identity and budget for its implementation. Together these partners will also provide technical support for the Ministries of Health and Justice to open registration offices in maternity hospitals; strengthen the capacities to provide registration services and increase demand; and support universal and timely birth registration, especially in rural and indigenous communities.

34. The programme will advocate for and provide technical assistance to Paraguay to promote the laws against corporal punishment and gender violence, in partnership with the National Commission against Violence. UNICEF also will provide technical support for the country to implement successful experiences in preventing and responding to violence at municipal level, through work in priority zones with the National Secretariat for Children and Adolescents (SNNA) and the Municipal Councils on Children. Prevention of violence, especially against girls and women, will also be incorporated into other programme components. UNICEF will collaborate technically with the SNNA and the International Labour Organization (ILO) to prevent child labour, especially domestic work, and expand coverage of the child labour eradication programme to more geographic areas and include services for adolescents.

35. In 2013 Paraguay signed the call for action to deinstitutionalize children. Jointly with civil society organizations, UNICEF will seek to strengthen the country's institutional capacities to supervise implementation of national legislation for deinstitutionalization, especially for children under age 3, and for protection of children in alternative care.

Social inclusion

36. In the framework of strategic objective 2 of the NDP (section 2.1, social protection) and UNDAF results 2.2.1 and 2.1.3, this component is aimed at increasing investment in children by 2019. It also supports development of public policies and monitoring of programmes providing disaggregated information to improve social inclusion among the most excluded and disadvantaged children and adolescents.

37. Together with the civil society organizations comprising the Front for Children, the programme will support government institutions in establishing an agile and effective mechanism to monitor the '20 Commitments for Children'. The objective is to increase investment in children and adolescents and promote efficient implementation of the commitments. UNICEF will support consolidation of monitoring, evaluation and accountability mechanisms for public policies for children and adolescents and the assignment of budget for them.

38. UNICEF will advocate and provide technical support to the Secretariat of Social Action to strengthen the components of comprehensive care for children and adolescents in social protection programmes. The objective is to ensure that the most excluded children and adolescents can benefit from pertinent and comprehensive care with a gender-sensitive approach.

39. National capacities will be strengthened to generate quality information disaggregated by gender, age, ethnic origin, geographic location and socioeconomic condition. This work will take place in collaboration with the General Directorate of Statistics, Surveys and Censuses (DGEEC) and sectoral ministries. UNICEF will work with academic centres to promote analysis and use of information from a

multidimensional poverty perspective to identify the most excluded and disadvantaged groups. This information will serve as input for designing effective interventions for social inclusion.

Cross-sectoral costs

40. This component covers costs associated with efficient and effective programme, financial and human resources management. It includes implementation of the UNICEF information and corporate communication strategy, strengthening of corporate social responsibility emphasizing child and adolescent rights, and corporate relations.

Summary budget table

Programme component	*(In thousands of United States dollars)*		
	Regular resources	*Other resources*	*Total*
Health and nutrition	470	2 430	2 900
Education	1 010	1 750	2 760
Protection	940	1 500	2 440
Social inclusion	1 030	1 000	2 030
Cross-sectoral	1 460	320	1 780
Total	**4 910**	**7 000**	**11 910**

Programme and risk management

41. The link between the country programme and the UNDAF will be supported by UNICEF participation in the United Nations inter-agency groups on human rights, indigenous peoples, gender and emergencies. These groups will promote joint programming, especially in gender and results-based management. The periodic United Nations country team meetings and the process of preparing the annual report of the resident coordinator will serve as a framework for inter-agency monitoring of UNDAF implementation. Sectoral coordination with strategic partners will continue through the donors' round tables involving United Nations agencies and external partners.

42. The scarcity of funds for implementing some thematic areas is one of the greatest risks to achievement of programme results. UNICEF will continue efforts to mobilize resources from traditional and non-traditional donors, some of them based in Paraguay, in priority thematic areas and in alignment with the Strategic Plan 2014-2017. Ties will be strengthened with national and international businesses operating in the country to promote corporate social responsibility with a child rights approach. The programme also will promote South-South cooperation as a mechanism for strengthening the exchange of knowledge and good practices. UNICEF will continue supporting work with partners and allies addressing nutrition, health, education and protection, to leverage resources for continuation of programme activities despite the scarcity of resources.

43. Programme results will be at risk if economic or fiscal crises prevent the country from keeping its promise to increase social investment focused on excluded and disadvantaged children. To mitigate this, UNICEF and its partners and allies will

strengthen parliamentary advocacy and continue to promote the position that realizing the rights of children and adolescents must be an absolute priority on the country's policy agenda. The partners also will advocate for greater and more efficient investment in children, seeking to ensure that programmes dedicated to children receive the necessary resources.

44. Weakness of the public sector's institutional management and frequent changes of counterparts are other risks that could compromise the achievement of results. Through technical assistance, UNICEF will reinforce the capacity of mid-level technical personnel to apply legislative and institutional frameworks. It also will continue to diversify partnerships, including with civil society, the private sector and the media, to jointly advocate for increasing the investment in children.

45. To ensure quality, efficiency and effectiveness, programme components will focus on a few high-priority themes. The situation analysis has been used to enhance programme design, and it will be used in monitoring the removal of bottlenecks at national and local levels. UNICEF will continue to promote implementation of the Harmonized Approach to Cash Transfers as one of the United Nations' mechanisms for simplifying and reducing transaction costs.

46. This country programme document outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at country level. Accountabilities of managers at the country, regional and headquarter levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

Monitoring and evaluation

47. The programme of cooperation will support monitoring and evaluation of the situation of children and compliance with the recommendations of the Committee on the Rights of the Child and the Committee on the Elimin. tion of Discrimination against Women. National capacities will be strengthened, especially those of the DGEEC, to ensure the availability of disaggregated statistics on children and adolescents. The use of periodic surveys on the situation of children will be promoted, such as the multiple indicator cluster survey (MICS), to obtain standardized data that can be used as baselines for reporting the impact of social programmes.

48. The programme of cooperation will support monitoring and evaluation of the situation of children and compliance with the recommendations of the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women. National capacities will be strengthened, especially those of the DGEEC, to ensure the availability of disaggregated statistics on children and adolescents. The use of periodic surveys on the situation of children will be promoted, such as the multiple indicator cluster survey (MICS), to obtain standardized data that can be used as baselines for reporting the impact of social programmes.

49. The capacities of the Ministries of Health and Education will be reinforced, along with those of implementing NGOs and priority municipalities, to analyse determining factors and generate information in real time through administrative records. This will make it possible to monitor the identification and elimination of bottlenecks impeding equitable access to quality services.

50. The Integrated Monitoring and Evaluation Plan calls for implementation of strategic evaluations to support programme activities. Depending on the availability of resources, the programme will support the first evaluation of the impact of the PANI,

along with local programmes for maternal/infant health, child-rearing actions in early childhood and nutrition and education. Surveys will be undertaken to measure the impact of advocacy and communication campaigns.

51. The annual programme reviews with counterparts will make it possible to periodically monitor progress, in support of necessary adjustments. These reviews will also inform and complement the UNDAF review processes. At the end of 2018, an external evaluation of the programme of cooperation will be conducted as an input for the next cycle.

Annex

Results and resources framework

Paraguay-UNICEF country programme of cooperation, 2015-2019

For additional acronyms used, see list below:

Relevant articles of the Convention on the Rights of the Child: 2 to 9, 12, 13, 17 to 21, 24, 28, 30 to 34 and 40
National priorities in accordance with the National Development Plan 2014-2018:
1. Improve the coverage, access, effectiveness and quality of health care.
2. Improve education quality at all levels, especially in rural areas and areas with social vulnerability.
3. Protect children against discrimination, violence, maltreatment and abuse.
4. Increase social protection with an equal-opportunity approach for vulnerable populations and populations in social risk.

UNDAF OUTCOME INVOLVING UNICEF:

1.1. Paraguay will have advanced in the protection and guarantee of the rights of all persons, with emphasis on those who are in situation of vulnerability and discrimination.
2.2.1. Strategies to increase public expenditure in social services and social protection
2.1.3. Promotion and support to increase the quantity and quality of investment on children and adolescents.
2.3. Paraguay will have advanced on integrated early child care, on universal access and culmination of pre-school, basic and secondary education, with high levels of quality.
2.4 Paraguay will have advanced towards universal health coverage, with access to integrated and quality services, taking into consideration diversity and specific needs of the population
2.5. Paraguay will have advanced towards food and nutritional security and access to safe water and sanitation.
Outcome indicator measuring change that includes UNICEF contribution:
- Infant and neonatal mortality rate
- Maternal mortality rate
- Net schooling rate in (a) preschool, (b) basic primary and second cycle, (c) basic third cycle and (d) secondary school
- Population up to age 3 in child care and early education institutions
- Prevalence of chronic child undernutrition

Related UNICEF Strategic Plan outcomes: 1, 4, 5, 6, 7

UNICEF outcomes	*Key progress indicators, baselines and targets*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by CP outcome (millions of US$)*

					Regular resources (RR); Other resources (OR)[16]		
1. By 2019, children, adolescents and women, especially from the most excluded groups, have access to maternal/neonatal health care of good quality and high impact, with a gender-sensitive and intercultural approach	1.1 Percentage of births attended by qualified personnel Baseline (2008): 95%[17] Goal (2019): 97% 1.2 Percentage of pregnant women with at least four prenatal check-ups. Baseline (2008):[18] 90.5% Goal (2019): 95% 1.3 Percentage of pregnant women and newborns receiving postnatal check-ups in the first 15 days following release from the hospital.[19] Baseline (2008): 76.6%[20] Goal (2019): 85%	Bio statistical data from the Ministry of Health and Social Well-being (MSPyBS) Baseline (MoRES) and periodic specialized surveys in intervention zones. MICS	1. Reduction of maternal and neonatal mortality is recognized as a national priority 2. National counterparts have the capacity to analyse and implement solutions to improve the health of pregnant women and newborns 3. Integrated Health Service Delivery Networks apply quality maternal/neonatal health norms and standards with an intercultural and gender-sensitive approach, improving their capacity in priority districts 5. Women and their partners, families and communities in priority districts have attitudes, knowledge and practices to improve maternal and neonatal health	Health Donors' Roundtable, PAHO, IDB, UNFPA Local health councils	**RR** 0.5	**OR** 1.7	**Total** **2.2**

[16] Figures are rounded to the nearest tenth.
[17] OPS-MSPyBS, Indicadores Básicos de Salud, 2013.
[18] ENDSSR, 2008, p. 232.
[19] Obstetrics and Neonatal Norms and Procedures (MSPyBS 2001) establish the controls that should be practised upon release, after 15 days and at the end of one month following birth. ENDSSR 2008, p. 241.
[20] ENDSSR, 2008, p 266.

2. By 2019, pregnant women and children under 5 receive quality and timely care to prevent and treat malnutrition and obesity in the Integrated Health Service Delivery Network.	2.1 Number of districts implementing the PANI's (a) preventive and (b) treatment modality. Baseline (2013): (a)15; (b)178 Goal (2019): (a) 242; (b) 242 2.2 Number of (a) children and (b) pregnant women benefiting from PANI Baseline (2013): (a) 37,075; (b) 5,452 Goal (2019): (a) 195,467; (b) 42,207 2.3 Per cent of target population attended by PANI having key knowledge of breastfeeding and adequate complementary feeding of children under age 5. Baseline: TBD Goal (2019): TBD 2.4 Exclusive breastfeeding rate Baseline: 12,8 % Goal (2019): 25 %	Household surveys National Institute for Food and Nutrition Information System	1. Paraguay has legislation, budget and capacity to implement solutions with a gender-sensitive approach to improve the nutrition of expectant mothers and children, especially in the most excluded populations 2. Health services in the priority districts have capacities to implement high-quality strategies for improving nutrition with a preventive approach 3. The country's health system has an online monitoring system for malnutrition, with disaggregated and quickly accessible information, especially on excluded populations	Health Donors' Roundtable. PAHO, FAO, WFP. Local health councils	0	0.7	**0.7**
3. By 2019, the most disadvantaged and excluded children and adolescents have access to inclusive and high-quality education that allows them to stay in the system and finish their studies.	3.1 Rate of termination of primary studies by cohort (EEB) Baseline (2011): 48.3% Goal (2019): 71% 3.2 Percentage of out-of-school children Baseline (2013): 8.4%. Goal: TBD% 3.3 Percentage of children at risk	Household surveys Ministry of Education and Culture Education Statistics System	1. The country has strategies, standardized normative frameworks and competencies for improving child-rearing practices in families and with comprehensive early childhood care services, in areas of greatest exclusion 2. The education system has information and inclusive	Education Donor Roundtable, OEI, IDB, NGOs Indigenous organizations	1.0	1.8	**2.8**

	of leaving school[21] (over age for grade) Baseline: 1st and 2nd cycle: 16%; 3rd cycle: 17%; secondary: 17% Goal (2019): TBD 3.4 Gender parity indexes in primary and secondary education. Baseline (2011): 0.97 Goal (2019): 1 3.5 Number of districts offering public or subsidized comprehensive early childhood care. Baseline (2014): TBD Goal (2019): TBD		methodologies with a gender-sensitive and intercultural approach, aimed at the most disadvantaged and excluded populations 3. The country has good practices in women's and youth participation that influence educational policy decision-making for the most excluded and disadvantaged boys, girls and adolescents.				
4. Children and adolescents have access to timely, high-quality birth registration and services for prevention of and response to violence, abuse and exploitation	a. Percentage of children registered in a timely way. Baseline (2011): 76.1% Goal (2019): 85% b. Number of municipalities implementing a comprehensive programme to prevent and respond to violence. Baseline (2014): TBD Goal (2019): TBD c. Percentage of children and adolescents who experienced intra-family violent disciplinary practices by	Record of complaints filed through Fonoayuda Information systems of the SNNA, National police and juvenile courts Specialized studies	1. The country has instruments and capacities to advance towards universal, timely birth registration, with emphasis on rural and indigenous communities, especially in priority zones 2. The country has a legislative framework and successful experience in comprehensively preventing and responding to violence, especially against girls, in priority zones and has expanded programmes for	Roundtable on inter-institutional coordination against violence National, departmental and local councils on children and adolescents CODENIs	0.9	1.5	**2.4**

[21] Grade repetition is used as an indicator of the risk of exclusion. The methodology assigns a moderate risk of exclusion for children with one year of repetition and critical risk for children with two or more years of repetition.

	adults. Baseline: 61% (2010) Goal: TBD d. Percentage of working children (ages 5-17) Baseline (2013): 23.5% Goal (2019): TBD e. Percentage of children (ages 5-17) served by child labour eradication programmes. Baseline (2013): 1.4% Goal (2019): TBD f. Percentage of institutionalized children adopted by a family in a timely way. Baseline (2014): TBD Goal (2019): TBD		eradication of child labour, with emphasis on girls employed as domestic workers 3. Paraguay has processes for the deinstitutionalization of children in shelter entities and protective alternative care facilities				
5. By 2019 the country has disaggregated information on children, a public policy framework for quality social services and a social protection system with comprehensive services for the most underprivileged and excluded children.	5.1 Number of commitments (out of 20) included in the NDP on which the Government renders accounts. Baseline (2013): 0 Goal (2019): 20 5.2 Number of renderings of account by the Executive Branch, regarding the 20 commitments. Baseline (2013): 0 Goal (2019): 4 5.3 Percentage of children, adolescents and women beneficiaries of social	General Directorate of Statistics, Surveys and Censuses. Secretariat of Social Action National Development Plan Articles published in the media	1. The country has policy, accountability and budgetary monitoring instruments with a comprehensive approach to children's rights 2. The children and adolescents served by social protection programmes benefit from pertinent and comprehensive attention with a gender-sensitive approach 3. A monitoring system on the rights of children and adolescents is implemented, generating reliable		1.0	1.0	**2.0**

	protection programmes receiving comprehensive and pertinent care. Baseline (2014): 0 Goal (2019): 30% 5.4. Number of specialized surveys on children and adolescents, and an estimate of the multidimensional child poverty rate. Baseline: 0 Goal: 2		information and analysis with an equity and gender-sensitive approach				
6. By 2019, the decision-makers, businesspeople, civil society and families improve their knowledge, practices and attitudes regarding children's access to their rights	6.1 Percentage of targeted audiences that recognize and engage with UNICEF as the leading agency for children's rights. Baseline: TBD Goal: TBD 6.2 Percentage of mothers who have improved their knowledge, attitudes and practices.	Reports in VISION	1. Decision makers, businesspeople, civil society and families have greater knowledge and participate in social mobilization and advocacy for the rights of children 2. Businesspeople are trained and implement corporate social responsibility with a child-centred approach in managing their businesses		0.2	0.3	**0.5**
7. Effective and efficient management of human and financial resources in pursuit of results	7.1. Percentage of (a) financial implementation and (b) DCT > 6 months. Baseline (2013): (a) 94%, (b) less than 10% Goal: (a) 95%, (b) 0%	Reports from VISION	3. High quality programme through results-based management		**1.3**	**0**	**1.3**

Total resources					**4.9**	**7.0**	**11.9**

Additional acronyms used:
CODENIs - Consejerias Municipales por los Derechos del Niño, Niña y Adolescente (Municipal Councils for Children and Adolescents)
DCT - (Direct Cash Transfer); Transferencia Directa de Efectivo
EEB - Educación Escolar Básica (Basic School Education)
ENDSSR - Encuesta Nacional de Salud Sexual y Reproductiva (National Survey on Sexual and Reproductive Health).
Fonoayuda - Telephone-based system for victims of abuse to call for help and assistance
MoRES - (Monitoring Results for Equity System); Sistema de Monitoreo de Resultados para la Equidad
OEI - Organización de Estados Americanos (Interamerican States Organization).
OPS - Organización Panamericana de la Salud (Pan American Health Organization, PAHO)
WFP - (World Food Programme); Programa Mundial de Alimentos